



Montgomery County Department of Housing and Community Affairs
Division of Consumer Affairs & Licensing and Registration Unit
100 Maryland Avenue, Rockville, Maryland 20850
240-777-3799 • FAX 240-777-3699 • TTD 240-777-3639 • www.montgomerycountymd.gov/dhca

Registered Living Unit AFFIDAVIT OF COMPLIANCE

- ☐ Please print clearly or type. Answer all questions.
- ☐ Please attach a sketch/floor plan of the Registered Living Unit.
- ☐ Completed application MUST be signed by the property owner.
- ☐ Mail or deliver completed application to:

Licensing and Registration Unit
DHCA, Division of Consumer Affairs
100 Maryland Avenue, Room 330
Rockville, Maryland 20850

Department of Housing and Community Affairs OFFICE USE ONLY

Date Received _____

Recorded By: _____

Notes: _____

Registration # _____

Entered By: _____

REGISTERED LIVING UNIT ADDRESS

_____	_____	_____
Street Number	Street Name	Street Type
_____	MARYLAND	_____
City		Zip

*Homeowner Association Name (if applicable)

*Note: if unit is located in a HOA, it is recommended that you review your community's governing documents to determine if you are subject to any community covenants, guidelines or restrictions.

USE INFORMATION

This Registered Living Unit:

(check one from below)

☐ Currently exists or

AND

(check one from below)

☐ Is/will be occupied by a relative of the owner

☐ Is being created

☐ Is/will be occupied by a household Employee

OCCUPANTS OF RLU

Occupant Name: _____

Relationship to Owner: _____

Occupant Name: _____

Relationship to Owner: _____

Occupant Name: _____

Relationship to Owner: _____



OWNER INFORMATION

_____ First Owner's Name		_____ Second Owner's Name (if applicable)	
_____ Daytime Phone	_____ Evening Phone	_____ Daytime Phone	_____ Evening Phone
_____ Fax#	_____ Email Address	_____ Fax#	_____ Email Address

Is property currently occupied by the owner? ☐ Yes ☐ No

If no, is entire property under construction? ☐ Yes ☐ No

If entire property is under construction, list owner's current address below:

_____ First Owner's Street Address			_____ Second Owner's Street Address		
_____ City	_____ State	_____ Zip	_____ City	_____ State	_____ Zip

I have received and read the Registered Living Unit Law
(Chapter 59, Section 59-A-6.10, Montgomery County Code)

Owner Initials

Owner Initials

I have received and read the Housing Standards Law
(Chapter 26, Montgomery County Code)

Owner Initials

Owner Initials

OWNER'S SIGNATURE

I will report to the Department of Housing and Community Affairs' Licensing/Registration Unit any changes of information provided in this Affidavit within 15 days of the change of information. I will disclose to any prospective purchaser(s) that there is a RLU on the property and an Affidavit on file with Department of Housing and Community Affairs. Upon sale of property, I will provide Department of Housing and Community Affairs with date of sale and name of new owner(s).

Registered Living Units are subject to Department of Permitting Services review and determination that property is in compliance with applicable laws, and Department of Housing and Community Affairs' Code Enforcement annual inspections to assure compliance with Housing Standards.

I affirm under penalty of perjury that the above information is true to the best of my knowledge and belief. I understand, accept, and will abide by regulations, requirements, and standards governing Registered Living Units.

X _____
Owner's Signature

Date

X _____
Owner's Signature

Date

NOTE: Registration Certificate will be issued upon receipt of completed Affidavit of Compliance and confirmation by DHCA Code Enforcement that the property is in compliance with Housing Standards and all applicable laws.